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MULTIPLE PENDENT CLAIM FEE CAL **\TION SHEET** FILING DATE (FOR USE WELL FORM PTO-875) APPLICANT(S) CLAIMS AS FILED AFTER AFTER I AMENDMENT 2 MAMENDMENT AS FILED IND. DEP. IND. DEP. AFTER AFTER IND. DEP. 12 22 32 33 TOTAL IND TOTAL DEP TOTAL PTO-1360 (REV. 11/04)

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